

## AGREEMENT FORM FOR NON-CANDIDATE/ISSUE ADVERTISEMENTS

<b>Station and Location:</b>	<b>Date:</b>
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I, Stephanie Maroney  
do hereby request station time concerning the following issue:

American Crossroads 1401 New York Avenue Suite 1200 Washington, DC 20005 Treasurer: Margee Clancy
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Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks

<b>Total Charges:</b>
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This broadcast time will be used by: American Crossroads

<p><b>Does the programming (in whole or in part) communicate "a message relating to any political matter of national importance?"</b></p> <p style="text-align: center;"> <input type="checkbox"/> <b>Yes</b>                                          <input checked="" type="checkbox"/> <b>No</b> </p>
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For programming that "communicates a message relating to any political matter of national importance," list the name of the legally qualified candidate(s) the programming refers to, the office(s) being sought and the date(s) of the election(s) (if applicable):

For programming that "communicates a message relating to any political matter of national importance," attach Agreed Upon Schedule (Page 3)

I represent that the payment for the above described broadcast time has been furnished by:

Treasurer Margee Clancy

and you are authorized to announce the time as paid for by such person or entity. The entity furnishing the payment, if other than an individual person, is:

☐ a corporation; ☐ a committee; ☒ an association; ☐ or other unincorporated group.

The names, offices, and addresses of the chief executive officers, directors, and/or authorized agents of the entity are named below (may be attached separately):

**THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACMENT OF ADVERTISING.**

I agree to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, that may ensue from the broadcast of the above-requested advertisement(s). For the above-stated broadcast(s), I also agree to prepare a script, transcript, or tape, which will be delivered to the station at least \_\_\_\_\_ before the time of the scheduled broadcasts.

**TO BE SIGNED BY ISSUE ADVERTISER**

7/19/12      Steph Mury      703-299-1760  
Date      Signature      Contact Phone Number

**TO BE SIGNED BY STATION REPRESENTATIVE**

☐ Accepted      ☐ Accepted in Part      ☐ Rejected

\_\_\_\_\_  
Signature      Printed Name      Title



## Print Date 09/26/12 Page 1 of 2

Order Sep 00:30:00

Estimate # 953

Alt Order #

Billing Type      Cash

Order Type GENERAL

Billing Cycle EOM/EOC

Billing Calendar BROADCAST

Demographic A25-54

Rev Codes      POL      POL      ISS

Product Codes PL

Priority P-3

Advertiser Ref

Order Share 21%    Market Value 278571

Competing Station	% of Order	Amount
CABLE	%	0
UNKWN	79%	220071
WBHS	%	0
WBSV	%	0
WCLF	%	0
WEDU	%	0
WFLA	%	0
WMOR	%	0
WTOG	%	0
WTSP	%	0
WTTA	%	0
WTVT	%	0
WUSF	%	0
WVEA	%	0
WWSB	%	0
WXPX	%	0

## Billing Plan

Month	# of Spots	Net Amount	Gross Amount	Rating	Start Date	End Date	# Spots	Net Amount	Gross Amount
October 2012	6	\$49,725.00	\$58,500.00	0.00	10/01/12	10/08/12	6	\$49,725.00	\$58,500.00
<b>Totals</b>	<b>6</b>	<b>\$49,725.00</b>	<b>\$58,500.00</b>	<b>0.00</b>					

Ln	Ch	Start	End	Inventory Code	Break	Start/End Time	Days	Len	Spots	Rate	Pri	Rtg	Type	<u>Totals</u>	
														Spots	Amount
E 1	WFTS	10/02/12	10/08/12	Monday 8-10p Dancing CM		758-10p	M-----	:30	1	\$14,000.00	P-3	0.00	NM	1	\$14,000.00
				Monday 8-10p Dancing											
		<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>			<u>Spots/Week</u>		<u>Rate</u>		<u>Rating</u>				
Week:		10/02/12	10/08/12	M-----			1		\$14,000.00		0.00				
E 2	WFTS	10/02/12	10/08/12	Thursday Prime B	CM	9-10p	---T---	:30	1	\$10,000.00	P-3	0.00	NM	1	\$10,000.00
				Grey's											



### Hiatus Dates

Order Sep 00:30:00

Estimate # 953

[illegible]